1				Application or Docket Number										
	PATENT	RD												
Effective October 1, 2003									10756269					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE					R THAN ENTITY	
י וו	OTAL CLAIM	S	26				RAT			FEE	7	RATE	FEE	
F	OR		NUMBER FILED		NUMBER EXTRA			BASIC FEE 385.00		85.00	OR	BASIC FEE	770.00	
Ī	OTAL CHARGE	ABLE CLAIMS	3 6 minus 20=		•	16		xs 9= 144		44	OR	X\$18=		
II	DEPENDENT (5 minus 3 =		•	a		X43= -96		86	OR	X86=		
\mathbb{L}	ULTIPLE DEPE	NDENT CLAIM F	RESENT					+145=	Т	70_	OR	+290=		
	* If the difference in column 1 is less than zero, enter "0" in column 2								. 6	15	OR	TOTAL		
3	3-31-05 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHE					THAN	
	Ī	CLAIMS	T	HIGH	ST	7				ADDI-		SMALL	ADDI-	
ENTA		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	Tie	ONAL FEE		RATE	TIONAL FEE	
AMENDMENT	Total	. 33	Minus	-31	0			XS 9=	1	1	OR	X\$18=		
AME	Independent	· 5	Minus	<u>- 5</u>			Ī	X43=		T	OR	X86=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1		OR	+290=		
		L	TOTA			00	TOTAL							
		A	DOIT. FEI	E L		UN ,	ADDIT. FEE							
_		(Cotumn 1) CLAIMS	<u> </u>	(Colum	\$T	(Cotumn 3)	r		LA	DDI-	ſ		400	
IENT B		REMAINING AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA		RATE	TIC	ONAL EE		RATE	ADDI- TIONAL FEE	
MENDMENT	Total	. 23	Minus	-3	6	2 ·	Γ	X\$ 9=	Π		OR	X\$18=		
AME	Independent FIRST PRESE	NTATION OF MI	Minus	PENDENT	CLAIM	- D x			5	00	OR	X86=		
		Γ	+!45=	r		OR	+290=							
	•	AI	TOTAL		10	OR ,	TOTAL DOIT, FEE							
								·						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FI	ER JSLY	PRESENT EXTRA		RATE	TIO	DI-	ſ	RATE	ADDI- TIONAL	
\$	Total	•	Minus	**	· ·	<u>-</u>	+	X\$ 9=	F	EE	_}	X\$18=	FEE	
	Independent	•	Minus	***	•		-		╀	<u> </u>	OR			
$ lap{}$	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X43=	<u>_</u>		OR	X86=		
• 10	the eater is and		+145=			OR	+290=							
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE														
ī	he *Highest Num	ber Previously Paid	For (Total or	Independen	ess than I) is the	i 3, enter "3." highest rumber	_		propri	ate box				